

<h1 style="margin: 0;">TRANSMITTAL FORM</h1> <p style="font-size: small; margin-top: 10px;">(to be used for all correspondence after initial filing)</p>	Attorney Docket No.	AUS920000800US1 (9000/10)
	Application Number	09/731,631
	Filing Date	DECEMBER 7, 2000
	First Named Inventor	STEVEN M. FRENCH
	Group Art Unit	2152
	Examiner	NGUYEN, THANH T

ENCLOSURES (check all that apply)			
<input checked="" type="checkbox"/> <b>Response to Non Compliant Appeal Brief</b>  <input type="checkbox"/> After Final  <input type="checkbox"/> Affidavits/declaration(s)  <input type="checkbox"/> Status Letter  <input type="checkbox"/> Petition for Extension of Time Request (dup) <input type="checkbox"/> Express Abandonment Request  <input type="checkbox"/> Information Disclosure Statement, PTO-1449 <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Response to Missing Parts/ Incomplete Application	<input type="checkbox"/> Assignment Papers  <input type="checkbox"/> Drawing Sheets  <input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition <input type="checkbox"/> To Convert a Provisional Application  <input type="checkbox"/> Change of Correspondence Address  <input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Small Entity Statement  <input type="checkbox"/> Request of Refund	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences  <input checked="" type="checkbox"/> <b>Revised Appeal Brief</b>  <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Post Card Receipt <input type="checkbox"/> Additional Enclosure(s) (please identify below): <div style="border: 1px solid black; height: 20px; margin-top: 5px;"></div> <div style="border: 1px solid black; height: 20px; margin-top: 5px;"></div> <div style="border: 1px solid black; height: 20px; margin-top: 5px;"></div>	<input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account No. <u>09-0447</u> (IBM CORPORATION). A duplicate copy of this sheet is enclosed.  <input checked="" type="checkbox"/> I hereby petition under 37 CFR § 1.136(a) for any extension of time required to ensure that this paper is timely filed. Please charge any associated fees which have not otherwise been paid to Deposit Account No. <u>09-0447</u> (IBM CORPORATION). A duplicate copy of this sheet is enclosed.

### CALCULATION OF FEE

				Small Entity		Large Entity		
	Claims After Amendment		Highest No. Previously Paid For	Present Extra	Rate	Add'l Fee	Rate	Add'l Fee
Total		Minus		0	x \$25=	0	x \$50=	
Indep.		Minus		0	x \$100=	0	x \$200=	
First Presentation of Multiple Dep. Claim					+\$180=	---	+\$360=	
					total add'l fee	\$ 0	total add'l fee	\$ 0

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm or Individual name	FRANK C. NICHOLAS Registration No. 33,983 CARDINAL LAW GROUP 1603 Orrington Avenue, Suite 2000 Evanston, IL 60201		
Signature	/FRANK C. NICHOLAS/	Date	<u>August 24, 2006</u>
CERTIFICATE OF ELECTRONIC SUBMISSION			
I hereby certify that this correspondence is being submitted electronically to the U.S. Patent and Trademark Office on this date:			
			<u>August 24, 2006</u>
Signature	/FRANK C. NICHOLAS/ FRANK C. NICHOLAS (33,983)		Date: <u>August 24, 2006</u>